## This form may be emailed, faxed, mailed, or submitted in person.



## DEVELOPMENT SERVICES DEPARTMENT

## **Permits and Inspections Division**

1522 Texas Parkway, Missouri City, TX 77489 Phone (281) 403-8600 • Fax (281) 261-4382 www.missouricitytx.gov developmentservices-psr@missouricitytx.gov

## **NEW COMMERCIAL BUSINESS**

(No Fee Application)

Allow Up To Seven (7) Business Days for the Review of This Document

Address of Business	Name of Proposed Business		
Legal Description Zoning District	Subdivision (if any)	Name of Shopping Ctr.	
Owner of Building Mail A	ddress Zip	Phone	
Name of Proposed Occupant (Tenant) Mail A	ddress Zip	Business Phone	
What name will the Electrical Service bill be in? (must be the exact name you have given to Electrical Provider)			
Type of Proposed Business (please be specific)  Occupancy Group (For Office Use Only)			
Business Hours Anticipated Date of I	Move-In	Number of Employees	
Are you locating this business from another Missouri City Location? Yes or No (please circle one) Do you own other businesses?  DESCRIBE BUSINESS IN DETAIL: (INCLUDE ALL ACTIVITIES)			
Applicant Printed Name Phone	E-mail Address		
Occupied Space Square Feet:	FOR OFFIC	FOR OFFICE USE ONLY:	
Have you checked with Utility District for additional requirements?  Yes No	PSRPermit Number		
Prior to Issuance of a Certificate of Occupancy: General electrical/occupancy inspections must be appro	ved Certificate of	This is a conditional Certificate of Zoning Compliance	
to have permanent electrical service and occupy building/space.	the Planning Approval	Date	
I am aware that I must apply for and receive a sign permit before I erect any sign in Missouri City.			
	Building Official	Date	
Applicant Date	D.S. Director	Date	
		Revised 4-4-2019	